Patent Application, Washington, DC 20231.

UTILITY PATENT APPLICATION TRANSMITTAL

Histor the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of Information unless it displays a valid OMB control number. Attorney Docket No. First Inventor Weens Bucay-Couto et al. Title Long-Term Indwelling Medical Devices Containing Slow-Releasing...

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Only for new monorovisional applications under 27 CFA 1.63(b)) Express Mail Label No. ET404064020US APPLICATION ELEMENTS Assistant Commissioner for Patent ADDRESS TO: Dox Patent AppRoadion Washington, D.C. 20231 See MPEP chapter 600 concerning utility patent application contents. Fee Transmittal Form (e.g., PTO/SB/17) CD-ROM or CD-R in duplicate, large table or 7. (Submit an original, and a duplicate for fee processing) Computer Program (Appendix) Applicant claims small entity status. 8. Nucleotide and/or Amino Acid Sequence Submission See 37 CFR 1.27. (if applicable, all necessary) Computer Readable Form (CRF) J Specification ITotal Pages 16 (preferred arrangement set forth below) Specification Sequence Listing on: b. Descriptive title of the invention - Cross Reference to Related Applications CD-ROM or CD-R (2 coples); or Statement Regarding Fed sponsored R & D ii, 🔲 paper Reference to sequence listing, a table, or a computer program listing appendix Statements verifying identity of above copies Background of the Invention - Brief Summery of the Invention ACCOMPANYING APPLICATION PARTS - Brief Description of the Drawings (if filed) Detailed Description Assignment Papers (cover sheet & document(s)) - Claim(s) 37 CFR 3.73(b) Statement Abstract of the Disclosure 10. **Power of Attorney** (when there is an assignee) English Translation Document (# applicable) ✓ Drawing(s) (35 U.S.C. 113) [Total Streets 1 Information Disclosure Copies of IDS 12 Statement (IDS)/PTO-1449 Citations Oath or Declaration [Total Pages 13. Preliminary Amendment Nawly executed (original or copy) Return Receipt Postcard (MPEP 503) 14. (Should be specifically itemized) Copy from a prior application (37 CFR 1.63(d)) Certified Copy of Priority Document(s) (for continuation/divisional with Box 18 completed) 15. (if foreign priority is claimed) **DELETION OF INVENTOR(S)** Request and Certification under 35 U.S.C. 122 16, (b)(2)(B)(l). Applicant must attach form PTO/SB/35 Signed statement attached deleting inventor(s) or its equivalent. named in the prior application, see 37 CFR 1.63(d)(2) and 1,33(b). Other: Application Data Sheet. See 37 CFR 1.76 If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, of then Application Data Sheet under 37 CFR 1.76: Divisional Continuation-in-part (CIP) of prior application No.: Continuation Group / Art Unit Prior poolication information: Examiner For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the eccompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the automitted application parts. 19. CORRESPONDENCE ADDRESS pr Correspondence address below Customer Number or Ber Code Label 27774 (Insert Customer No. or Attech ber code label here) Name Address CITY State Zip Code Country Telephone Registration No. (Anomes/Agent) Name (Print/type) 34,297 David B. Bonbam

Auly 20, 2001 Date Signatura Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will very depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box BEST AVAILABLE COP

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Complete If Known Application Number Uwassigned Filed Herewith Filing Date First Named Inventor Weena Bucay-Couto et al. Upassigned Examiner Name Unessigned **Group Art Unit** Attorney Docket No. 01-089

METHOD OF PAYMENT	FEE CALCULATION (continued)					
The Commissioner is hereby authorized to charge 3. ADDITIONAL FEES						
Indicated fees and credit any overpayments to:						
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Channel Ann. Retributed See Securined	139	130	130		Non - English specification	
Under 37 CPR 85 1.16 and 1.17	147	2,820	147		For filing a request for ex parts recxamination	
Apprount claims small entity stakes.	112	920*	112		Requesting publication of SIR prior to Examiner action	
2. Payment Enclosed:	1181	,640*	1191	1, 640 *	Requesting publication of SIR after Examiner action	
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FEE CALCULATION	116	390	216			
1. BASIC FILING FEE	117	890	217	445	•	
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Fee Fee Fee Fee Description	126	1,890	228	945	Extension for reply within fifth month	
Code (3) Code (3) Fee Paid 101 710 201 355 Utility filing fee 718.08	119	310	219	155	Notice of Appeal	
101 /10 201 399 Dunly raing fee // // 106 320 206 150 Design Ming fee	120	310	220	165	Filing a brief in support of an appeal	
107 490 207 245 Phant Fine (ee	121	270	221	135	Request for one hearing	ال
109 710 208 255 Reissue Ring fee	138	1,510	138	1,510	Petition to institute a public use proceeding	
114 150 214 75 Provisional flang fee	140	110	240	55	Petition to revive - unavoidable	
SUBTOTAL (1) \$710.08	141	1,240	241	620	Pelition to revive - unintentional	
	142	1,240	242	620	Utility issue fee (or reissue)	
2. EXTRA CLAIM FEES	143	440	243	220	Dealgn tesus fee	
Extra Claims below Fee Peld	177	600	244	300		
Total Claims 29 -28^^ = 9 X 18.90 = 167.00	5 122	130	122	130	Petitions to the Commissioner	
Independent 3 - 3== 0 X \$0.00 = 0.00	123	50	125	50		
Multiple Dependent	128	180	128	180	Statement	
Fee Fee Fee Fee Fae Description Code (\$) Code (\$)	581	40	581	40	Recording each petant essignment per property (times number of properties)	48.00
103 18 203 9 Claims in excess of 20	146	710	246	366	Filing a automission after final rejection (37 CFR § 1.129(a))	
102 80 202 40 Independent claims in excess of 3 104 270 204 135 Multiple dependent claim, if not paid	149	710	249	386	For each additional invention to be examined (37 CFR § 1.129(b))	
	179	710	279	355	Request for Continued Examination (RCE)	
109 80 209 40 Reissus independent dalms over original patent	169	900			Request for expedited examination	
110 18 210 9 ** Reissaus claims in excess of 20 and over original patent			(specify	_	or a design application	
SUBTOTAL (2) \$162.60	1		1 -1 .	· -		
"or number previously paid, if greater, For Relssues, see above "Reduced by Basic Filing Fee Paid SUBTOTAL (3)						\$40.00
Complete (# applicable)						
Name (Print/Type) David B. Boshare		Regist	retion N	0	34,297 Telephone 703-433-0510	

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